



## **Families Connecting with Families in the Heartland of America**

### **National Conference for Parents of Children who are Blind or Visually Impaired Omaha, Nebraska July 13-15, 2007**

#### ***Activity Permission Form for Families***

**Please mail or FAX to:**

**Susan LaVenture  
Executive Director  
NAPVI  
P.O. Box 317  
Watertown, MA 02471**

**FAX: 617-972-7444**

**For more information, contact NAPVI at 800-562-6265**

#### **Activity Permission for Children**

***To be completed by parents or guardians***

**I, \_\_\_\_\_ (Parent Name) give permission for my  
child \_\_\_\_\_ to participate in any/all off site activities  
planned for the children registered for the childcare program during the National Family  
Conference on July 13-15, 2007.**

**Signature: \_\_\_\_\_**

**Date: \_\_\_\_\_**



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**Omaha, Nebraska  
July 13-15, 2007**

***Media Release Form for Professionals and Families***

**Media Release**

***For parents/guardians, children, and professionals***

**In attending the 2007 Families Connecting with Families in the Heartland of America Conference, I am specifically granting permission for use of the name, voice or words, and any image created digitally or traditionally of myself, any participating family member or my child in television, radio, films, newspaper, printed materials or websites in any form. This includes 35mm photos, videos, digital photos or any other form of image reproduction. Photos will be used in an educationally professional manner by the planning committee of the 2007 Family Conference and may appear in print, on websites, or as design elements in public displays and presentations.**

**Name (s):**

**Mother:** \_\_\_\_\_

**Father:** \_\_\_\_\_

**Grandmother:** \_\_\_\_\_

**Grandfather:** \_\_\_\_\_

**Professional:** \_\_\_\_\_

**Guardian if applicable:** \_\_\_\_\_

**Child(ren) Name(s):** \_\_\_\_\_

**Signature (s):** \_\_\_\_\_

**Date:** \_\_\_\_\_

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FAX 617-972-7444                      For more information: 800-562-6265**